Case 3:13-bk-30084 Doc 5

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B22A (Official Form 22A) (Chapter 7) (12/10)

In re Sylvia Lynn Dean	
Debtor(s)	According to the information required to be entered on this statement
Case Number:	(check one box as directed in Part I, III, or VI of this statement):
(If known)	☐ The presumption arises.
	■ The presumption does not arise.
	☐ The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
171	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	 b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/ ☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

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		Part II. CALCULATION OF N	10N	NTHLY INC	O	ME FOR § 707(b)('	7) E	EXCLUSION		
		tal/filing status. Check the box that applies					emen	nt as directed.		
	a. 🗆	Unmarried. Complete only Column A ("I	Debt o	or's Income'') fo	or L	ines 3-11.				
2	b. Married, not filing jointly, with declaration of separate households. By checking this box, debtem "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only for Lines 3-11.				nd I a	are living apart o	the	than for the		
	(Married, not filing jointly, without the decl "Debtor's Income") and Column B ("Spo	use's	Income") for I	Line	es 3-11.		_		
		Married, filing jointly. Complete both Col					'Spo	use's Income")	for	Lines 3-11.
		gures must reflect average monthly income r lar months prior to filing the bankruptcy cas						Column A		Column B
		ing. If the amount of monthly income varie						Debtor's		Spouse's
	six-mo	onth total by six, and enter the result on the	appro	opriate line.		•		Income		Income
3	Gross	s wages, salary, tips, bonuses, overtime, co	mmi	ssions.			\$	3,076.01	\$	
		ne from the operation of a business, profes								
		the difference in the appropriate column(s) cess, profession or farm, enter aggregate num								
		ater a number less than zero. Do not include								
4		b as a deduction in Part V.				<u>.</u>				
				Debtor		Spouse				
	a.	Gross receipts	\$			\$ \$				
	b. c.	Ordinary and necessary business expenses Business income	\$	btract Line b fro		•	\$	0.00	Φ.	
			_				Ψ	0.00	Ψ	
	Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any									
	part of the operating expenses entered on Line b as a deduction in Part V.									
5				Debtor		Spouse				
	a.	Gross receipts	\$.00					
	b.	Ordinary and necessary operating expenses Rent and other real property income		btract Line b fro	.00		\$	0.00	¢	
6	_	est, dividends, and royalties.	Бu	btract Line o ne)111 I	anc a	\$	0.00		
7		on and retirement income.					\$	0.00		
					C	46 a b a a a b a l d	Ф	0.00	Ф	
		amounts paid by another person or entity, uses of the debtor or the debtor's dependen								
8	purpo	ose. Do not include alimony or separate main	ntena	nce payments of	r an	nounts paid by your				
		e if Column B is completed. Each regular p					Φ.	0.00	ф	
	•	syment is listed in Column A, do not report		•			\$	0.00	Þ	
		ployment compensation. Enter the amount yer, if you contend that unemployment com								
0	However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A									
9	or B,	but instead state the amount in the space bel	ow:							
		nployment compensation claimed to benefit under the Social Security Act Debte	or \$	0.00	Spc	ouse \$	¢.	0.00	¢	
	_	continuation and social security rice			_		\$	0.00	Þ	
10	on a so spous maint receiv	ne from all other sources. Specify source as eparate page. Do not include alimony or see if Column B is completed, but include alternace. Do not include any benefits received as a victim of a war crime, crime against stic terrorism.	para l oth ed un	te maintenance er payments of der the Social S anity, or as a vic	pa alii ecu	yments paid by your mony or separate rity Act or payments of international or				
			¢.	Debtor		Spouse				
	a. b.		\$			\$ \$				
		and enter on Line 10	ψ	<u>I</u>		Ψ	L (*)	0.00	ф	
			1. \ /=\	\ \ \ 1111 \ C \		10: 01 4 7.7	\$	0.00	3	
11		otal of Current Monthly Income for § 707(nn B is completed, add Lines 3 through 10 in					\$	3,076.01	\$	

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		3,076.01
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION		
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	36,912.12
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)		
	a. Enter debtor's state of residence: TN b. Enter debtor's household size: 1	\$	39,082.00
	Application of Section 707(b)(7). Check the applicable box and proceed as directed.		
15	■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.	does no	ot arise" at the
	☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.		

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)					
	Part IV. CALCULA	ATION OF CURR	ENT MONTHLY	INCOME FOR §	707(b)(2)
16	Enter the amount from Line 12.				\$
17	Marital adjustment. If you checke Column B that was NOT paid on a dependents. Specify in the lines bel spouse's tax liability or the spouse's amount of income devoted to each not check box at Line 2.c, enter zer a. b. c. d.	regular basis for the hou ow the basis for excluding support of persons othe purpose. If necessary, lis	usehold expenses of the ing the Column B inco er than the debtor or the	e debtor or the debtor's ome (such as payment of ne debtor's dependents) a	the and the
18	Total and enter on Line 17 Current monthly income for § 70'	7(b)(2) Subtract Line 1	17 from Line 16 and a	ator the regult	\$
10	•			FROM INCOME	
	Subpart A: Dec	luctions under Stand	dards of the Intern	al Revenue Service (IRS)
National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.				available ne number	
National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. Persons under 65 years of age Persons 65 years of age or older				f persons of age or currently ts whom sult in	
	a1. Allowance per personb1. Number of persons	a2 b2			
	c1. Subtotal	c2	-		\$
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. \$				

20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your cour available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of the number that would currently be allowed as exemptions on your feany additional dependents whom you support); enter on Line be the tot debts secured by your home, as stated in Line 42; subtract Line be from not enter an amount less than zero. a. IRS Housing and Utilities Standards; mortgage/rental expense be Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	aty and family size (this information is ourt) (the applicable family size consists of deral income tax return, plus the number of al of the Average Monthly Payments for any		
	c. Net mortgage/rental expense	Subtract Line b from Line a.	\$	
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities			
22A	Local Standards: transportation; vehicle operation/public transportation are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 8. 10 1 2 or more. If you checked 0, enter on Line 22A the "Public Transportation" amounts.	f whether you pay the expenses of operating a es or for which the operating expenses are ant from IRS Local Standards:		
	Transportation. If you checked 1 or 2 or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/	applicable Metropolitan Statistical Area or	\$	
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)			
23	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an ownersy vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Line result in Line 23. Do not enter an amount less than zero.	e IRS Local Standards: Transportation court); enter in Line b the total of the Average ne 42; subtract Line b from Line a and enter		
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$		
	b. 1, as stated in Line 42	\$	\$	
24	c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a. Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average			
	b. 2, as stated in Line 42 c. Net ownership/lease expense for Vehicle 2	\$ Subtract Line b from Line a.	\$	
25	Other Necessary Expenses: taxes. Enter the total average monthly estate and local taxes, other than real estate and sales taxes, such as inc security taxes, and Medicare taxes. Do not include real estate or sales	expense that you actually incur for all federal, ome taxes, self employment taxes, social	\$	

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26	Other Necessary Expenses: involuntary deductions for endeductions that are required for your employment, such as re Do not include discretionary amounts, such as voluntary	\$		
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.			
28	Other Necessary Expenses: court-ordered payments. Ent pay pursuant to the order of a court or administrative agency include payments on past due obligations included in Line	, such as spousal or child support payments. Do not	\$	
29	Other Necessary Expenses: education for employment or the total average monthly amount that you actually expend for education that is required for a physically or mentally challed providing similar services is available.	or education that is a condition of employment and for	\$	
30	Other Necessary Expenses: childcare. Enter the total aver childcare - such as baby-sitting, day care, nursery and presch		\$	
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on			
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you			
33	Total Expenses Allowed under IRS Standards. Enter the	total of Lines 19 through 32.	\$	
	Subpart B: Additional Living Expense Deductions Note: Do not include any expenses that you have listed in Lines 19-32 Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your			
34	dependents.			
	a. Health Insurance \$			
	b. Disability Insurance \$			
	c. Health Savings Account \$		\$	
	Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below: \$			
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.		\$	
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you			
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local			
38	Education expenses for dependent children less than 18. actually incur, not to exceed \$147.92* per child, for attendan school by your dependent children less than 18 years of age. documentation of your actual expenses, and you must expenses and not already accounted for in the IRS Standards.	You must provide your case trustee with claim why the amount claimed is reasonable and	\$	

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).				
41	Total Additional Expense Deduction	s under § 707(b). Enter the total of L	ines 34 through 40		\$
	S	Subpart C: Deductions for Del	bt Payment		
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.				
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.		\$	□yes □no	
			Total: Add Lines		\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor				
			Т	otal: Add Lines	\$
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28.				
	Chapter 13 administrative expenses. chart, multiply the amount in line a by				
45	issued by the Executive Office information is available at www. the bankruptcy court.)	strict as determined under schedules e for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of ve expense of Chapter 13 case	x Total: Multiply Line	es a and b	\$
46	Total Deductions for Debt Payment.	Enter the total of Lines 42 through 45			\$
	Si	ubpart D: Total Deductions fi	rom Income		
47	Total of all deductions allowed unde	r § 707(b)(2). Enter the total of Lines	33, 41, and 46.		\$
	Part VI. DE	ETERMINATION OF § 707(b)(2) PRESUMP	ΓΙΟΝ	
48	Enter the amount from Line 18 (Cur	rrent monthly income for § 707(b)(2))		\$
49	Enter the amount from Line 47 (Tot	al of all deductions allowed under §	707(b)(2))		\$
50	Monthly disposable income under §	707(b)(2). Subtract Line 49 from Line	48 and enter the resu	ılt.	\$
51	60-month disposable income under § result.	707(b)(2). Multiply the amount in Li	ne 50 by the number	60 and enter the	\$

	Initial presumption determination. Check the applicable box and proceed as dis	rected.			
52	☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.				
	☐ The amount set forth on Line 51 is more than \$11,725* Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.				
	☐ The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Co	omplete the remainder of Part VI (I	Lines 53 through 55).		
53	Enter the amount of your total non-priority unsecured debt		\$		
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number	er 0.25 and enter the result.	\$		
	Secondary presumption determination. Check the applicable box and proceed a	as directed.			
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box of this statement, and complete the verification in Part VIII.	• •			
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. of page 1 of this statement, and complete the verification in Part VIII. You may a		ion arises" at the top		
	Part VII. ADDITIONAL EXPENSE	CLAIMS			
56	Other Expenses. List and describe any monthly expenses, not otherwise stated in you and your family and that you contend should be an additional deduction from 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All feach item. Total the expenses.	your current monthly income und	ler §		
	Expense Description	Monthly Amou	nt		
	a.	\$			
	b.	\$			
	c.	\$			
	d.	\$			
	Total: Add Lines a, b, c, and d	\$			
	Part VIII. VERIFICATION	V			
	I declare under penalty of perjury that the information provided in this statement must sign.) Date: January 11, 2013 Signature	is true and correct. (If this is a jointer: /s/ Sylvia Lynn Dean	ıt case, both debtors		
57	Signatur	Sylvia Lynn Dean			
		(Debtor)			

^{*} Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **07/01/2012** to **12/31/2012**.

Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **CENVEO**

Income by Month:

07/2012	\$2,889.72
08/2012	\$3,186.89
09/2012	\$2,651.80
10/2012	\$2,648.80
11/2012	\$3,916.77
12/2012	\$3,162.08
Average per month:	\$3,076.01
	08/2012 09/2012 10/2012 11/2012 12/2012